

1 of 2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <u>09/601644</u>	FILING DATE	
							APPLICANT(S)		
CLAIMS									
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	INC.	
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50									
TOTAL IND.		3		5					
TOTAL DEP.		22		31					
TOTAL CLAIMS		25		36					
PTO-136 (Rev. 11-83)									

BEST AVAILABLE COPY

20/2

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 09/601644

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	5		5			
TOTAL DEP.	32		32			
TOTAL CLAIMS	37		37			
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TOTAL DEP.						
TOTAL CLAIMS						